

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
CARSON AMERICA

A. Full Name (Last, First, Middle Initial)
ANGELA JOHNSON

Mailing Address 10034 COUNTRY HILLS CT.

City	State	Zip Code
UNION	KY	41091-9758

FEC ID number of contributing
federal political committee.

C

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : SA17.545736

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
DR. ANN L. JOHNSON

Mailing Address 1220 S. OCEAN BLVD.

City	State	Zip Code
PALM BEACH	FL	33480-5016

FEC ID number of contributing
federal political committee.

C

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.356732

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

5400.00

REATTRIBUTION/REDESIGNATION REQUESTED

C. Full Name (Last, First, Middle Initial)
DR. ANN L. JOHNSON

Mailing Address 1220 S. OCEAN BLVD.

City	State	Zip Code
PALM BEACH	FL	33480-5016

FEC ID number of contributing
federal political committee.

C

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.356732B

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

-2700.00

[MEMO ITEM]
REDESIGNATION TO GENERAL

Subtotal Of Receipts This Page (optional).....

5900.00

Total This Period (last page this line number only).....